PTO/SBIOR (12-4)

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FOR BASIC FEE	NUMBER FILED	NUMBER EXTRA	RATE (\$) FEE	(1)	RATE (\$)	FEE (\$)
197 OFR 1,16(a), (b), or (c)) BEARCH FEE 197 OFR 1.16(k), (i), or (m)) XAMINATION FEE						170
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NDEPENDENT CLAIMS OF CFR 1.16(N)	4 minus 3 =	1. /	X = X	OR	× × =	72
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The Highest Number Previously Paid For IN THIS SPACE is less than 3, enter 3.

The Highest Number Previously Paid For IN THIS SPACE is less than 3, enter 3.

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